

Form CPF M 102: Campaign Finance Report

Municipal Form

TOWN CLERK RECEIVED

Office of Campaign and Political Finance

2018 AFR 23 FH 1: 38

File with: City or Town Clerk or Election Commission

Fill in Reporting Period	dates: Beginning Date: Dece	mber 31,2017 End	ling Date: Apr	rl 18, 2018	GHEADOW
Type of Report: (Check	one)				
☐ 8th day preceding prelimi	•	30 day after election	on year-e	end report 🛛 d	lissolution
Richard L. Freccero	Full Mama (if annicable)	Committee to Elect			
Candidate Full Name (if applicable) School Committee		Committee Name			
	e Sought and District		Name of Committe	ee Treasurer	
9 Channing Road, East Longmeadow, MA 01028		9 Channing Road, East Longmeadow, MA 01028			
F-mail:	sidential Address	Committee Mailing Address			
Phone # (optional):	= =	Phone # (optional):			
101	SUMMARY BALANC	CE INFORMATIO	DN:		7
Line 1: End	ling Balance from previous report			205.87	
Line 2: Tot	al receipts this period (page 3, line 11))		0	
Line 3: Sub	ototal (line 1 plus line 2)			205.87	
Line 4: Tot	al expenditures this period (page 5, lir	ne 14)	828	205.87	Ξ
Line 5: End	ling Balance (line 3 minus line 4)			0	m
Line 6: Tot	al in-kind contributions this period (pa	age 6)		0	
Line 7: Tot	al (all) outstanding liabilities (page 7)			0	23
Line 8: Nar	ne of bank(s) used: United Bank				
activity, including all contributions, l-	oort including attached schedules and it is, to the best oans, receipts, expenditures, disbursements, in-kind under the authority or on below of this committee in	contributions and liabilities f accordance with the require	or this reporting period	od and represents the o	campaign /
FOR CANDIDATE FILING	SONLY: Affidavit of Candidate: (check 1 bo	ox only)		/	/
Candidate with Committee an I certify that I have examined the activity, of all persons acting uncommendations.	d no activity independent of the committee is report including attached schedules and it is, to the der the authority or on behalf of this committee in ac any expenditures on my behalf during this reporting	best of my knowledge and becordance with the requirement	pelief, a true and comparts of M.G.L. c. 55	plete statement of all of all of all of all of all of all of an	campaign finance ly contributions,
I certify that I have examined the finance activity, including contri	OR Candidate with independent activity filing so is report including attached schedules and it is, to the ibutions, loans, receipts, expenditures, disbursements pursons acting under the authority or on behalf of the	e best of my knowledge and l s, in-kind contributions and l is committee in accordance v	abilities for this report with the requirements	rting period and repres	
Signed under the penalties of perju	my cunway mec	(Cand	lidate's signature)	Date. // /	20110

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)
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	The Secretary Control of the Secretary Control		
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	II.		
	5 201		
	-1 100 41		
ine 9: Total Receip	ots over \$50 (or listed above)		
ine 10: Total Recei	pts \$50 and under* (not listed above)		
ine 11: TOTAL R	ECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2
			Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
The state of the s				
	4			
		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and t		
	Enter on page 1, line 4 →			205.

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
		<i>c.</i>		
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	0